PTO/SB/06 (05-03)
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U.S. Patient and Tradomark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE SETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number 9/656, 239		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL	SMALL ENTITY		OTHER THAN OR SMALL ENTITY	
FOR .	NUMBER FILED	NUMB	ER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))					s	OR		s
TOTAL CLAIMS (37 CFR 1.16(c))		20- 1		x s 9 -		OR	x s 18 -	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	A Carpotas	0= ·		x 5 43 .		OR	x <u> </u>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))				+2.145.		OR	+5290-	
* If the difference in column 1 is less than zero, enter "O" in column 2.				TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								
7/	kalumn 1)	(Column 2)	(Cotumn 3)	SMALL I	ENTITY	OR		R THAN ENTITY
	CLAIMS EMAINING AFTER IENOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (properties) (properties)	4 Minus	20	° 0	x \$		OR	x s=	1
E independent (Proping	4 Minus	<u></u>		x \$=		OR	X \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+s=		OR	+ \$	
Waster ANE. ON				TOTAL . ADD'L FEE		OR	ADD'L FEE	
	olumn 1) CLAMS	(Column 2)	(Cotumn 3)					
	MAINING AFTER ENDMENT	NUMPER , PREVIOUSLY PAID FOR	PRESENT EXERA	RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
Total (CFOR 1.16(c)) Independent (FFOR 1.16(c))	4 Minus	70	· Ø	x \$=		OR	x \$=	
Z Independent (Pr CFR 1,160g)	✓ Minus	"8	-0	x s=		OR	x s=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+5		OR	+\$=	
				TOTAL ADD'L FEE	7	OR	TOTAL ADD'L FEE /	
	olumn 1)	(Column 2)	(Cotumn 3)					
O RE	CLAIMS MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE/		RATE	ADDI- TIONAL FEE
Total .	4 Minus	20	-	x \$_ =.	/	OR	x \$_=	7
Total Total (pr GFR 1.16(p)) Independent (pr GFR 1.16(p))	Minus	-5	•/	x s =	/	OR	x \$=	1
FIRST PRESENTATION	+5		OR OR	+ s=	1			
	TOTAL ADD'L FEE	· ·	OR	TOTAL ADD'L FEE				
" if the entry in column 1 is less than the entry in column 2, write "0" in column 3. " if the "Highest Number Previously Paid For" IN THIS \$PACE is less than 20, enter "20". "" if the "Highest Number Previously Paid For" IN THIS \$PACE is less than 3, enter "3".								

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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